Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself							
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
	Write the name that is on your government-issued	Linda First name	-	First name				
	picture identification (for example, your driver's	R.		riist name				
	license or passport).	Middle name	-	Middle name				
	Bring your picture identification to your meeting with the trustee.	Cannon Connor Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)				
	meeting with the trustee.							
2.	All other names you have used in the last 8 years	Linda Cannon Connor FKA Linda R. Giles Linda C. Connor						
	Include your married or maiden names.	Linda Renee Cannon Connor Linda Cannon						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3810						

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Debtor 1 Linda R. Cannon Connor Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs		
5.	Where you live	1572 Erica Renee Court Belleville, IL 62220 Number, Street, City, State & ZIP Code Saint Clair County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Deb	tor 1 Linda R. Cannon C	onnor				Case number (if known)		
Part	Tell the Court About	our Bankru	ptcy Cas	se				
7.	The chapter of the Bankruptcy Code you are	by 11 U.S.C. § 342(b) for Individuals Filir riate box.	ng for Bankruptcy					
	choosing to file under	☐ Chapter	7					
		☐ Chapter	11					
		☐ Chapter	12					
		■ Chapter	13					
8.	How you will pay the fee	about order	t how you . If your a	the entire fee when I file my petition. Please check with the clerk's office in your local court for more or you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or nour attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check ed address.				
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pa					
			-	e in Installments (Officia my fee be waived (Yo	•	otion only if you are filing for Chapter 7. B	v law a judge may	
		but is that a	not requipplies to	ired to, waive your fee your family size and y	, and may do so only it ou are unable to pay th	f your income is less than 150% of the of the fee in installments). If you choose this	ficial poverty line option, you must fill	
		out th	ie <i>Applic</i> i	ation to Have the Chap	ter 7 Filing Fee Waive	ed (Official Form 103B) and file it with you	r petition.	
9.	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Casa mumban		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		1	Debtor			Relationship to you		
		1	District		When	Case number, if known		
		1	Debtor			Relationship to you		
		1	District		When	Case number, if known		
11.	Do you rent your	■ No.	Go to lir	ne 12.				
	residence?	☐ Yes.	Has you	ır landlord obtained an	eviction judgment aga	ainst you?		
			-	No. Go to line 12.				
				Yes. Fill out <i>Initial Stat</i> this bankruptcy petition		on Judgment Against You (Form 101A) a	nd file it as part of	

Dec	tor 1 Linda R. Cannon C	onnor		Case number (if known)			
Par	Report About Any Bu	sinesses	You Own as a Sole Propr	ietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of b	pusiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	ny			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, S	State & ZIP Code			
	it to this petition.		Check the appropriate	box to describe your business:			
			☐ Health Care Bu	siness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Re	eal Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as	s defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))			
			☐ None of the about	ove			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadline operation	s. If you indicate that you a	ne court must know whether you are a small business debtor so that it can set appropriate re a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	lo. I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	· Have An	y Hazardous Property or A	Any Property That Needs Immediate Attention			
	Do you own or have any	■ No.	,				
	property that poses or is alleged to pose a threat	_					
	of imminent and	☐ Yes.	What is the hazard?				
	identifiable hazard to public health or safety? Or do you own any						
	property that needs immediate attention?		If immediate attention is needed, why is it needed	?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	-			Number, Street, City, State & Zip Code			

Debtor 1 Linda R. Cannon Connor

Case number (if known)

### Part 5:

### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Linda R. Cannon Connor				Case numb	Case number (if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are de ersonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		business debts? Business debts are debt				
			☐ No. Go to line 16c.	,				
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	u owe that are not consumer debts or busine	ess debts			
17.	Are you filing under	■ No.	I am not filing under Chap	ter 7. Go to line 18.				
	Chapter 7?	■ No.	3					
	Do you estimate that after any exempt property is excluded and	☐ Yes.		<ol> <li>Do you estimate that after any exempt pronds will be available to distribute to unsecure</li> </ol>				
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49		☐ 1,000-5,000 ☐ 5001-10,000	☐ 25,001-50,000 ☐ 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	□ \$0 - \$		☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$		☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		001 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		_ ` '	001 - \$300,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Par	t 7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
			If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with th	e chapter of title 11, United States Code, sp	pecified in this petition.			
		ent, concealing property, or obtaining money up to \$250,000, or imprisonment for up to 20						
		Linda R	a R. Cannon Connor  Cannon Connor  of Debtor 1	Signature of Debt	or 2			
		Executed	February 27, 2019 MM / DD / YYYY		M / DD / YYYY			

Debtor 1 Linda R. Cannon (	Connor	Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ted States Code, and have e that I have delivered to the d	
If you are not represented by an attorney, you do not need to file this page.	342(b) and, in a case in which § 707(b)(4)(D) in the schedules filed with the petition is inco		o knowledge after an inquiry that the information
. •	/s/ John J. Johnston	Date	February 27, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	John J. Johnston 03124527		
	Printed name		
	DIXON & JOHNSTON, PC		
	101 West Main Street		
	Belleville, IL 62220  Number, Street, City, State & ZIP Code		
	Contact phone 618-233-1103	Email address	JohnJohnston@dixonjohnston.com
	03124527 IL		
	Bar number & State		

		-				
FIII	in this information to identify your ca	ase:				
Deb	Linda R. Cannon Co First Name	DNNOr Middle Name	Last Name			
	otor 2  use if, filling)  First Name	Middle Name	Last Name			
``	. 0,	SOUTHERN DISTRICT	OF ILLINOIS			
	e number					
(if kn					_	t if this is an ded filing
Of	ficial Form 106Sum					
Su	mmary of Your Assets a	nd Liabilities an	d Certain Statistical In	formation	•	12/15
info	s complete and accurate as possible mation. Fill out all of your schedules original forms, you must fill out a ne	s first; then complete th	e information on this form. If you			
Par	11: Summarize Your Assets					
					Your a	ssets If what you own
1.	Schedule A/B: Property (Official For 1a. Copy line 55, Total real estate, fro	m 106A/B) m Schedule A/B			\$	200,000.00
	1b. Copy line 62, Total personal prope					14,479.00
	1c. Copy line 63, Total of all property	on Schedule A/B			\$	214,479.00
Par	2: Summarize Your Liabilities					
					Your li	abilities
					Amoun	t you owe
2.	Schedule D: Creditors Who Have Cla. 2a. Copy the total you listed in Colum			of Schedule D	\$	318,000.00
3.	Schedule E/F: Creditors Who Have U 3a. Copy the total claims from Part 1				\$	0.00
	3b. Copy the total claims from Part 2	(nonpriority unsecured c	laims) from line 6j of Schedule E/F		\$	255,281.00
			You	r total liabilities	\$	573,281.00
		_				
Par						
4.	Schedule I: Your Income (Official Form Copy your combined monthly income		I		\$	6,709.50
5.	Schedule J: Your Expenses (Official F Copy your monthly expenses from line				\$	2,465.00
Par	4: Answer These Questions for A	dministrative and Statis	stical Records			
6.	Are you filing for bankruptcy under  ☐ No. You have nothing to report or	-	neck this box and submit this form to	the court with yo	our other so	chedules.
7.	■ Yes What kind of debt do you have?					
			lebts are those "incurred by an indivig		a personal	, family, or
	Your debts are not primarily co		re nothing to report on this part of the	e form. Check this	s box and s	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

### Case 19-30219-lkg Doc 1 Filed 02/27/19 Page 9 of 50

Debtor 1 Linda R. Cannon Connor Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$\_\_\_\_\_\_4,075.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	tal claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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		Cas	e 19-30219·	-ikg Dol	<b>5 T</b>	FIIEU UZIZIII I	aye 10	01 30	
Fill	in this inform	nation to identify	your case and th	nis filing:					
Deb	otor 1	Linda R. Canr	non Connor						
Dok	otor 2	First Name	Middle	Name		Last Name			
	use, if filing)	First Name	Middle	Name		Last Name			
Uni	ed States Ban	kruptcy Court for	the: SOUTHER	N DISTRICT (	OF ILL	INOIS			
Cas	e number								☐ Check if this is an
						_			amended filing
_		<u>m 106A/B</u>							
<u>Sc</u>	hedule	• A/B: Pr	operty						12/15
		ve any legal or equ				vn or Have an Interest In  land, or similar property?			
	Yes. Where is	tne property?							
1.1		_		What is the	proper	ty? Check all that apply			
		Renee Court available, or other desc	cription	_	e-family				ms or exemptions. Put the ims on Schedule D:
	,			ш .		ulti-unit building n or cooperative			is Secured by Property.
	Dalla, dila		00000 0000			d or mobile home	Current va		Current value of the
	Belleville	IL State	62220-0000 ZIP Code	Land Invest	stment p	ronertv	entire prop \$20	perty? 00,000.00	portion you own? \$200.000.00
				☐ Times	share	поротту	<u>.</u>		our ownership interest
				_		st in the property? Check one		ee simple, tena e), if known.	ncy by the entireties, or
	Saint Clair			_	or 2 only				
	County			☐ At lea	ast one	Debtor 2 only of the debtors and another	(see in	structions)	munity property
						you wish to add about this iter ion number:	n, such as loc	iai	
				Ranch, 3	bedro	oms, 3 baths			
								<b>-</b>	
		ive attached for F				from Part 1, including an			\$200,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 <u>Li</u>	nda R. Car	nnon Connor	Case n	Case number (if known)			
3. <b>C</b>	ars, vans,	trucks, trac	etors, sport utility ve	ehicles, motorcycles				
	No							
	Yes							
						5		
3.1	Make:	Lexus		Who has an interest in the property? Chec			d claims or exemptions. Put cured claims on Schedule D:	
	Model:	GX		Debtor 1 only		Creditors Who Have	Claims Secured by Property.	
	Year:	2004 nate mileage:	236,000	Debtor 2 only		Current value of the entire property?	Current value of the portion you own?	
	Other info	_	230,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		entine property:	portion you own:	
		Jiiiidii011.		At least one of the deptors and another				
				☐ Check if this is community property (see instructions)	-	\$11,000.0	0 \$11,000.00	
•	No Yes	oats, trailers	, motors, personal w	atercraft, fishing vessels, snowmobiles, m	notorcycle acce	ssories		
				n for all of your entries from Part 2, in that number here			\$11,000.00	
	_							
Part			onal and Household Ite				Comment value of the	
ָ סט	you own o	r nave any i	legal or equitable in	terest in any of the following items?			Current value of the portion you own?  Do not deduct secured claims or exemptions.	
		Najor appliar	room chairs, din	s, china, kitchenware stove, refrigerator, sofa, end table, co ing room table & chairs, desk, 3 beds rs in family room			\$2,000.00	
	•	Televisions a including cel		eo, stereo, and digital equipment; compu nedia players, games	iters, printers, s	canners; music col	lections; electronic devices	
			4 TVs, laptop, de	esktop computer, cell phone			\$350.00	
	,	Antiques and other collecti	d figurines; paintings, ions, memorabilia, co	prints, or other artwork; books, pictures, bllectibles	or other art obje	ects; stamp, coin, c	or baseball card collections;	
			Books, CDs, DV	Ds			\$20.00	
			and hobbies	nd other hobby equipment: hicycles nool	tables golf clui	he ekie: canace ar	nd kayake: carpontry tacla:	

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools musical instruments

■ No

☐ Yes. Describe.....

Debtor 1	Linda R. Cannon Co	onnor	C:	ase number (if known)	
I0. <b>Firea</b> <i>Exar</i> ■ No	rms nples: Pistols, rifles, shotg	uns, ammunition, and r	elated equipment		
	s. Describe				
□ No		urs, leather coats, desig	ner wear, shoes, accessories		
	Cloth	ing			\$500.00
□ No		ostume jewelry, engage	ement rings, wedding rings, heirloom jew	/elry, watches, gems, go	old, silver
	Jewe	lry			\$25.00
Exar  No Yes  14. Any c  No Yes	s. Give specific information the dollar value of all of	ehold items you did no	ot already list, including any health ai rt 3, including any entries for pages y	· 	\$2,895.00
	escribe Your Financial Asse		ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No			ne, in a safe deposit box, and on hand w	hen you file your petitio	n
				Cash	\$4.00
Exar			ints; certificates of deposit; shares in crewith the same institution, list each.  Institution name:	edit unions, brokerage h	ouses, and other similar
	17.1.	Checking	FCB (7803)		\$225.00
	17.2.	Savings	FCB		\$200.00

Official Form 106A/B

Schedule A/B: Property

Debtor 1	Linda R. Cannon C	onnor	Case r	number (if known)
	17.3	3. Checking	FCB (7804)	\$150.00
	17.4	1. Savings	Regions - daughter's Social Securit	ry account \$5.00
	ls, mutual funds, or pub nples: Bond funds, invest		rokerage firms, money market accounts	
■ No	S	Institution or issuer	name:	
19. <b>Non-</b> and j	publicly traded stock an joint venture	id interests in incorp	orated and unincorporated businesses, incl	uding an interest in an LLC, partnership,
■ No □ Yes	s. Give specific information	on about themlame of entity:		ownership:
Nego	otiable instruments include	e personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money o ansfer to someone by signing or delivering them	
	s. Give specific informatio	on about them ssuer name:		
_Exan	ement or pension accounples: Interests in IRA, El		403(b), thrift savings accounts, or other pension	n or profit-sharing plans
■ No □ Yes	s. List each account sepa Typ	rately. e of account:	Institution name:	
Your		sits you have made s	o that you may continue service or use from a continue service	
■ No □ Yes	S		Institution name or individual:	
_	ities (A contract for a per	riodic payment of mon	ey to you, either for life or for a number of years	s)
■ No □ Yes	s Issuer na	ame and description.		
	sts in an education IRA S.C. §§ 530(b)(1), 529A(b		qualified ABLE program, or under a qualified	I state tuition program.
	Institution	n name and description	on. Separately file the records of any interests.1	1 U.S.C. § 521(c):
25. <b>Trust</b> ■ No	s, equitable or future in	terests in property (	other than anything listed in line 1), and righ	ts or powers exercisable for your benefit
	s. Give specific information	on about them		
			nd other intellectual property eds from royalties and licensing agreements	
	s. Give specific information	on about them		
Exan	ises, franchises, and other ples: Building permits, e		<b>les</b> perative association holdings, liquor licenses, p	professional licenses
■ No □ Yes	s. Give specific information	on about them		
Money o	r property owed to you?	?		Current value of the portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

Debtor 1	Linda R. Cannor	n Connor	Case number (if known)	
■ No	funds owed to you			
⊔ Yes.	Give specific informa	ation about them, including wheth	her you already filed the returns and the tax years	
■ No			, child support, maintenance, divorce settlement, propert	y settlement
Exam <sub>i</sub> ■ No		disability insurance payments, di I loans you made to someone ek	isability benefits, sick pay, vacation pay, workers' compe se	ensation, Social Security
31. Interes	sts in insurance pol	icies	gs account (HSA); credit, homeowner's, or renter's insura	unce
■ Yes.	Name the insurance	company of each policy and list Company name:	tits value. Beneficiary:	Surrender or refund value:
		Term Life Insurance		\$0.00
somed ■ No □ Yes.  33. Claims Examp ■ No □ Yes.	one has died.  Give specific informs against third participles: Accidents, emp	ation  es, whether or not you have fill loyment disputes, insurance claim		
■ No	. Describe each clain		re, including counterclaims of the debtor and rights t	o set off claims
■ No	nancial assets you c	•		
			including any entries for pages you have attached	\$584.00
Part 5: De	escribe Any Business-R	Related Property You Own or Have a	an Interest In. List any real estate in Part 1.	
No. Go	own or have any legal of the or of t	or equitable interest in any busines:	s-related property?	
		Commercial Fishing-Related Proper est in farmland, list it in Part 1.	rty You Own or Have an Interest In.	
46. <b>Do you</b>	u own or have any le	egal or equitable interest in an	y farm- or commercial fishing-related property?	

The second of th

No. Go to Part 7.

Deb	otor 1	Linda R. Cannon Connor		Case number (if known)	
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.	•	have other property of any kind you did not already lis les: Season tickets, country club membership	1?		
_	■ No □ Yes. 0	Give specific information			
54.	Add th	he dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$200,000.00
56.	Part 2	2: Total vehicles, line 5	\$11,000.00		
57.	Part 3	: Total personal and household items, line 15	\$2,895.00	-	
58.	Part 4	: Total financial assets, line 36	\$584.00		
59.	Part 5	: Total business-related property, line 45	\$0.00	_	
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00	_	
61.	Part 7	: Total other property not listed, line 54	\$0.00	-	
62.	Total	personal property. Add lines 56 through 61	\$14,479.00	Copy personal property t	otal \$14,479.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$214,479.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Linda R. Cannon C	Connor		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS	
Case number _ (if known)				☐ Check if this is an amended filing

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.
1572 Erica Renee Court Belleville, IL 62220 Saint Clair County	\$200,000.00	■ \$15,000.00 735 ILCS 5/12-901
Ranch, 3 bedrooms, 3 baths Line from <i>Schedule A/B</i> : 1.1		□ 100% of fair market value, up to any applicable statutory limit
2004 Lexus GX 236,000 miles	\$11,000.00	\$2,400.00 735 ILCS 5/12-1001(c)
Life from Schedule A.B. 3.1		☐ 100% of fair market value, up to any applicable statutory limit
Washer, dryer, stove, refrigerator, sofa, end table, coffee table, 2 living room	\$2,000.00	\$2,000.00 735 ILCS 5/12-1001(b)
chairs, dining room table & chairs, desk, 3 beds, 3 dressers, sofa, love seat, 2 chairs in family room Line from <i>Schedule A/B</i> : 6.1		□ 100% of fair market value, up to any applicable statutory limit
4 TVs, laptop, desktop computer, cell phone	\$350.00	\$350.00 735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1		☐ 100% of fair market value, up to any applicable statutory limit
Books, CDs, DVDs Line from Schedule A/B: 8.1	\$20.00	\$20.00 735 ILCS 5/12-1001(b)
Ello Holli Golloddio 74B. G. I		100% of fair market value, up to any applicable statutory limit

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
			100% of fair market value, up to any applicable statutory limit		
Jewelry Line from Schedule A/B: 12.1	\$25.00		\$25.00	735 ILCS 5/12-1001(b)	
Elle Holli Genedale PVB. 12.1			100% of fair market value, up to any applicable statutory limit		
Cash Line from Schedule A/B: 16.1	\$4.00		\$4.00	735 ILCS 5/12-1001(b)	
Line nom schedule PAB. 10.1			100% of fair market value, up to any applicable statutory limit		
Checking: FCB (7803) Line from Schedule A/B: 17.1	\$225.00		\$225.00	735 ILCS 5/12-1001(b)	
Elle Holli Genedale PVB. 17.1			100% of fair market value, up to any applicable statutory limit		
Savings: FCB Line from Schedule A/B: 17.2	\$200.00		\$200.00	735 ILCS 5/12-1001(b)	
Line IIIIII Schedule AVB. 17.2			100% of fair market value, up to any applicable statutory limit		
Checking: FCB (7804) Line from Schedule A/B: 17.3	\$150.00		\$150.00	735 ILCS 5/12-1001(b)	
Line from Schedule Arb. 17.5			100% of fair market value, up to any applicable statutory limit		
Savings: Regions - daughter's Social Security account	\$5.00		\$5.00	735 ILCS 5/12-1001(b)	
Line from <i>Schedule A/B</i> : 17.4			100% of fair market value, up to any applicable statutory limit		

No

Yes Did you acquire the property covered by the exemption within 1 215 days before you fill	d thin again

□ No

☐ Yes

Fill in this information to ide	entify you	r case:				
Debtor 1 Linda R.	Cannon	Connor  Middle Name  Last Name			-	
Debtor 2		made rane				
(Spouse if, filing) First Name		Middle Name Last Name			-	
United States Bankruptcy Cou	urt for the:	SOUTHERN DISTRICT OF ILLINOIS			_	
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
Official Form 106D						
Official Form 106D				_		
Schedule D: Cred	ditors	Who Have Claims Secure	ed k	y Propert	у	12/15
		two married people are filing together, both are e number the entries, and attach it to this form. On				
1. Do any creditors have claims s	ecured by y	our property?				
☐ No. Check this box and	d submit th	is form to the court with your other schedules	s. You	have nothing else	to report on this form.	
Yes. Fill in all of the inf	formation b	pelow.				
Part 1: List All Secured C						
		ore than one secured claim, list the creditor separate	alv for	Column A	Column B	Column C
each claim. If more than one cred	itor has a pa	rticular claim, list the other creditors in Part 2. As mu	uch .	Amount of claim	Value of collateral	Unsecured
as possible, list the claims in alpha	abetical orde	r according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
OneMain Financial G	roup,					•
LLC		Describe the property that secures the claim:	, —	\$15,000.00	\$11,000.00	\$4,000.00
Creditor's Name		2004 Lexus GX 236,000 miles				
PO Box 3251		As of the date you file, the claim is: Check all that apply.				
Evansville, IN 47731-	3251	☐ Contingent				
Number, Street, City, State & Zip	p Code	☐ Unliquidated				
MI 1110 01 1		Disputed				
Who owes the debt? Check on	e.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or s car loan)	secured			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and	another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to	а	Other (including a right to offset)				
community debt						
Date debt was incurred		Last 4 digits of account number				
2.2 Shellpoint Mortgage Servi/US Bank		Describe the property that secures the claim:		\$303,000.00	\$200,000.00	\$103,000.00
Creditor's Name		1572 Erica Renee Court Belleville, IL	1 -			
		62220 Saint Clair County				
		Ranch, 3 bedrooms, 3 baths				
PO Box 740039		As of the date you file, the claim is: Check all that apply.				
Cincinnati, OH 45274	-0039	Contingent				
Number, Street, City, State & Zip	p Code	Unliquidated				
Who owes the debt? Check on	•	Disputed  Nature of lien. Check all that apply.				
_	· ·	_				
■ Debtor 1 only □ Debtor 2 only		<ul> <li>An agreement you made (such as mortgage or s car loan)</li> </ul>	secured			
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and	another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to	а	Other (including a right to offset)				
community debt						

Debtor 1 Linda R. Cannon Connor			Cas	se number (if known)	
	First Name	Middle Name	Last Name		
Date d	lebt was incurred		Last 4 digits of account number	2776	
٨٨٨	the deller value of very	entries in Column	A on this page. Write that number has	200	\$318,000.00
	•		A on this page. Write that number he	ere.	\$310,000.00
	s is the last page of you e that number here:	ir form, add the do	llar value totals from all pages.		\$318,000.00
Part 2	List Others to Be	Notified for a D	ebt That You Already Listed		
to coll	ect from you for a debt	you owe to someo hat you listed in Pa	ne else, list the creditor in Part 1, and	d then list the	eady listed in Part 1. For example, if a collection agency is trying e collection agency here. Similarly, if you have more than one of have additional persons to be notified for any debts in Part 1,
	Name, Number, Street, US Bank	City, State & Zip Co	de	On which	line in Part 1 did you enter the creditor? 2.2
	Anselmo Lindberg	& Associates L	LC	Last 4 digi	its of account number CH20
	1771 West Diehl F	Road			
	Suite 120				
	Naperville, IL 6056	3			

		· ·	`	9	
Fill in this i	information to identify your	case:			
Debtor 1	Linda R. Cannon C	onnor			
20010	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS		
Case numb	or				
(if known)	<u> </u>				heck if this is an
				ar	mended filing
O(() - 1 - 1 - 1	T 400F/F				
	Form 106E/F				4044
	le E/F: Creditors W		Ured Claims RIORITY claims and Part 2 for creditors w		12/15
Schedule G: I D: Creditors \ the Continuat number (if kn	Executory Contracts and Unexpir Who Have Claims Secured by Pro- ion Page to this page. If you have own).	ed Leases (Official Form 10 perty. If more space is nee e no information to report in	Also list executory contracts on Schedul 06G). Do not include any creditors with particle, copy the Part you need, fill it out, nurn a Part, do not file that Part. On the top o	artially secured claims tha Imber the entries in the bo	at are listed in Schedule oxes on the left. Attach
	ist All of Your PRIORITY Un				
	reditors have priority unsecured	claims against you?			
	So to Part 2.				
☐ Yes.					
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any o	reditors have nonpriority unsecu	red claims against you?			
☐ No. Y	ou have nothing to report in this pa	rt. Submit this form to the co	urt with your other schedules.		
Yes.					
claim, list	t the creditor separately for each cla	aim. For each claim listed, ide	er of the creditor who holds each claim. If entify what type of claim it is. Do not list clain we more than three nonpriority unsecured cla	ns already included in Part	If more than one
4.1 Am	ericollect, Inc.	Last 4 digits	s of account number		\$230.00
	priority Creditor's Name 51 South Alverno Road	When wee t	he debt incurred?		
	Box 1566	when was t	ne debt incurred?		
_	nitowoc, WI 54221				
	nber Street City State Zip Code	As of the da	ate you file, the claim is: Check all that app	ly	
	o incurred the debt? Check one.	☐ Continge	ent		
<b>=</b> [	Debtor 1 only	☐ Unliquida			
	Debtor 2 only	☐ Disputed			
	Debtor 1 and Debtor 2 only	·	NPRIORITY unsecured claim:		
	At least one of the debtors and anot	ther Student I	oans		
	Check if this claim is for a comm	unity debt	ns arising out of a separation agreement or	divorce that you did not	
Is th	ne claim subject to offset?	report as prid	ority claims	•	
1	No	☐ Debts to	pension or profit-sharing plans, and other sin	milar debts	
	Yes	Other. Sp	oecify Collection		

Debtor	1 Linda R. Cannon Connor	Case number (if known)	
4.2	Barclays Bank Delaware	Last 4 digits of account number	\$400.00
	Nonpriority Creditor's Name 100 South West Street Wilmington, DE 19801	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.3	Illinois Department of Revenue	Last 4 digits of account number	\$6,000.00
	Nonpriority Creditor's Name PO Box 19035	When was the debt incurred?	
	Springfield, IL 62794-9035  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 2006, 2007	
4.4	Internal Revenue Service	Last 4 digits of account number	\$240,000.00
	Nonpriority Creditor's Name PO Box 7346	When was the debt incurred?	
	Philadelphia, PA 19101-7346  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify 2006, 2007	

Debtor	Linda R. Cannon Connor	Case number (if known)					
4.5	Opportunity Financial, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$743.00				
	75 Remittance Drive Dept. 6231	When was the debt incurred?					
_	Chicago, IL 60675-6231  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
		☐ Unliquidated					
	Debtor 2 only	Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Loan					
4.6	Radiology Consultants of Mid-Americ Nonpriority Creditor's Name	Last 4 digits of account number	\$243.00				
	Consumer Collection Management,	When was the debt incurred?					
	PO Box 1839						
	Maryland Heights, MO 63043						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Collection					
	Radiology Consultants of Mid-Americ	Last 4 digits of account number	\$140.00				
	Nonpriority Creditor's Name Consumer Collection Management, Inc	When was the debt incurred?					
	PO Box 1839 Maryland Heights, MO 63043						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Collection					

Debtor	1 Linda R. Cannon Connor	Case number (if known)	
4.8	Radiology Consultants of Mid-Americ  Nonpriority Creditor's Name Consumer Collection Management, Inc PO Box 1839	Last 4 digits of account number  When was the debt incurred?	\$88.00
	Maryland Heights, MO 63043		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	
4.9	SFC of Illinois/Security Finance Nonpriority Creditor's Name	Last 4 digits of account number	\$2,175.00
	PO Box 1893 Spartanburg, SC 29304	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan	
4.10	Tek Collect, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$701.00
	PO Box 1269 Columbus, OH 43216-1269	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection	

Debtor 1	Linda R. C	Cannon Connor		Case nu	umber (if knowr	n)	
4.11 W	orld Finan	ce Corporation	Last 4 digits of account number				\$4,561.00
No	npriority Cred	litor's Name	When was the debt incurred?	_	<del>* 1,00 1100</del>		
	D Box 642 reenville, S		when was the debt incurred?				
		City State Zip Code	As of the date you file, the claim	is: Check	all that apply		
Wh	no incurred t	he debt? Check one.					
	Debtor 1 only	у	Contingent				
	Debtor 2 only	v	Unliquidated				
		d Debtor 2 only	Disputed				
_		of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
		s claim is for a community debt	☐ Student loans				
		bject to offset?	☐ Obligations arising out of a sep report as priority claims	paration ag	reement or divo	orce that you did not	
_	No		Debts to pension or profit-shari	ing plans a	and other simils	ar debts	
	Yes		■ Other. Specify Loan	ing plane, c	and other omine	a dobio	
			Other. Specify				
Part 3:	List Others	s to Be Notified About a Debt	Γhat You Already Listed				
trying to o more than any debts	collect from y n one credito in Parts 1 o	ou have others to be notified about you for a debt you owe to someone or for any of the debts that you liste r 2, do not fill out or submit this pa	else, list the original creditor in P d in Parts 1 or 2, list the additional ge.	arts 1 or 2 I creditors	, then list the o	collection agency here. o not have additional pe	Similarly, if you have
Name and A			which entry in Part 1 or Part 2 did yo e 4.9 of (Check one):		•		
	st Bouleva	-	<del></del>			Priority Unsecured Claims	
-	, IL 62221	aru -		■ Part 2:	Creditors with N	Nonpriority Unsecured Cla	aims
,	•	Las	t 4 digits of account number				
Name and A	Address	On	which entry in Part 1 or Part 2 did yo	u list the or	riginal creditor?		
	nance Corp					Priority Unsecured Claims	
2630 Mas Suite 104	scoutah Av	/enue		Part 2:	Creditors with N	Nonpriority Unsecured Cla	aims
	IL 62221						
,	,	Las	t 4 digits of account number				
Part 4:	Add the Ar	nounts for Each Type of Unse	cured Claim				
6. Total the		certain types of unsecured claims.		eporting p	ourposes only.	28 U.S.C. §159. Add the	e amounts for each type
					Т	otal Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
Total claims		Taxes and certain other debts yo	u owe the government	6b.	\$	0.00	
iioiii i ait	6c.	Claims for death or personal inju	<del>-</del>	6c.	\$	0.00	
	6d.	Other. Add all other priority unsecu	•	6d.	\$	0.00	
							_
	6e.	Total Priority. Add lines 6a through	n 6d.	6e.	\$	0.00	
						otal Claim	
	6f.	Student loans		6f.	\$	0.00	
Total claims from Part		Obligations arising out of a separ	ration agreement or divorce that yo	ou		2.25	
	J	did not report as priority claims	_	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing	= :	6h.	\$	0.00	
	6i.	Other. Add all other nonphority uns	ecured claims. Write that amount he	re. 6i.	\$	255,281.00	
	6j.	Total Nonpriority. Add lines 6f thro	ough 6i.	6j.	\$	255,281.00	

Case 19-30219-lkg Doc 1 Filed 02/27/19 Page 25 of 50

Fill in this infor	mation to identify your	case:			
Debtor 1	Linda R. Cannon (				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check	if this
				amen	ded filir

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.3	Name				<u> </u>
	ivame				
	Number	Street			_
	City		State	ZIP Code	_
2.4	Oity		Otato	Zii Oodc	
۷.٦	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5			<u> </u>		
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Fill in this i	nformation to identify ye	our case:			
Debtor 1	Linda R. Canno				
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for th	e: SOUTHERN DISTRICT	OF ILLINOIS		
Case number (if known)	er				☐ Check if this is an amended filing
	Form 106H ule H: Your Co	odebtors			12/15
people are f fill it out, an your name a	iling together, both are of number the entries in and case number (if known	equally responsible for sup the boxes on the left. Attacl wn). Answer every question	plying correct informa h the Additional Page	ition. If more space is to this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
_ `	ou nave any codeptors?	(If you are filing a joint case,	do not list either spous	e as a codebtor.	
■ No □ Yes					
		you lived in a community pana, Nevada, New Mexico, Pu			ty states and territories include )
	Go to line 3. Did your spouse, former s	spouse, or legal equivalent live	e with you at the time?		
in line 2 Form 1	2 again as a codebtor or	nly if that person is a guarar	ntor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Officia , Schedule E/F, or Schedule G to
_	column 1: Your codebtor ame, Number, Street, City, State and	nd ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				Schedule D, lin	e
N	ame			☐ Schedule E/F, ☐ Schedule G, lin	
	umber Street ity	State	ZIP Code		
3.2				☐ Schedule D, lin	e e
N:	ame			☐ Schedule E/F,☐ Schedule G, lin	
	umber Street	State	ZIP Code		
C	··y	Giaio	ZIF COUC		

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Fill	in this information to identify your	case:								
Del	btor 1 Linda R. Ca	nnon Connor								
1	btor 2 buse, if filing)									
Uni	ited States Bankruptcy Court for th	e: SOUTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)		-					ed filing ent showir	ng postpetition following date:	
0	fficial Form 106I					Ī	/IM / DD/ Y	/YYY		
S	chedule I: Your Ind	ome								12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.	a are married and not fili ur spouse is not filing w . On the top of any addit	ing jointly, and your ith you, do not incl	spouse	is li rmat	ving witl ion abοι	h you, inc ıt your sp	lude infor ouse. If m	rmation abou nore space is	t your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	iling spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Office Manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	Edward's Realty Services	Edward's Realty & Construction Services						
	Occupation may include student or homemaker, if it applies.	Employer's address	615 Missouri Av East Saint Louis		:01					
		How long employed t	here? April 20	)18			_			
Pai	rt 2: Give Details About Mo	onthly Income								
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing to	report fo	r any	line, writ	e \$0 in the	e space. Ir	nclude your no	n-filing
	ou or your non-filing spouse have n e space, attach a separate sheet t		ombine the informati	on for all	emp	loyers fo	r that pers	on on the	lines below. If	you need
						For De	otor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, saldeductions). If not paid monthly			2.	\$	1	,733.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	1,7	33.00	\$	N/A	

Debt	or 1	Linda R. Cannon Connor		Case r	number ( <i>if known</i> )		
				For	Debtor 1		btor 2 or ing spouse
	Copy	/ line 4 here	4.	\$	1,733.00	\$	N/A
5.	l ist :	all payroll deductions:					
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$—	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	_ 5h.+	· —	0.00	-	N/A
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,733.00	\$	N/A
8.	8a. 8b. 8c.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	8a. 8b.	\$ \$	0.00	\$ 	N/A N/A
		settlement, and property settlement.	8c.	\$	2,150.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	1,711.50	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify: Disabled Daughter's Social Security	_ 8h.+	· —	923.00		N/A
		Disabled Daughter's Food Stamps	_	\$	192.00	\$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,976.50	\$	N/A
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	6	\$,709.50 + \$_		N/A = \$ 6,709.50
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not sify:	depen	-	•		nedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaes					12. \$ 6,709.50 Combined
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				monthly income
		Yes. Explain:  8c: Mother, Juanita Shannon-Lawary, contributes \$6 Son, Christopher Connor, contributes \$1500.00 per level of home					

Official Form 106I Schedule I: Your Income page 2

Fill in this inforr	nation to identify ye	our case:					
Debtor 1	Linda R. Can	non Conr	nor		Che	eck if this is:	
						An amended filing	•
Debtor 2 (Spouse, if filing)							owing postpetition chapter f the following date:
(Spouse, il lilling)						15 expenses as 0	Title following date.
United States Bar	kruptcy Court for the:	SOUTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case number (If known)							
Official F	orm 106J						
Schedul	e J: Your	Exner	1808				12/1
Be as complet information. If number (if known Part 1: Des	e and accurate as	s possible eded, atta ry question	. If two married people a ich another sheet to this				
■ No. Go		in a separ	ate household?				
	No	·	ial Form 106J-2, <i>Expense</i>	s for Separate Hous	ehold of D	ebtor 2.	
2. Do you ha	ve dependents?	□ No					
Do not list and Debto		Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not sta	te the						□ No
dependen	s names.			Disabled Child		43	■ Yes
							□ No
							Yes
							□ No
							_ □ Yes □ No
							☐ Yes
expenses	xpenses include of people other t ind your depende	han $_{oldsymbol{\square}}$	No Yes				_ les
Estimate your	f a date after the	our bankrı	uptcy filing date unless y				napter 13 case to report of the form and fill in the
	ich assistance an		government assistance is cluded it on <i>Schedule I:</i>			Your ex	penses
,	,						
	or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	je 4.	\$	0.00
If not incl	uded in line 4:						
4a. Rea	l estate taxes				4a.	\$	0.00
	perty, homeowner's	s, or renter	's insurance		4b.	·	0.00
	ne maintenance, re				4c.	·	125.00
	neowner's associat		dominium dues	and an object	4d.	\$	0.00
	i iiiniiinana navm						

Deb	tor 1 Linda R. Cannon Connor	Case num	ber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	0.00
	6b. Water, sewer, garbage collection	6b.	\$	121.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	266.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies			600.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	100.00
10.	Personal care products and services	10.		150.00
	Medical and dental expenses	11.	\$	250.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.			
	Do not include car payments.	12.	\$	300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Charitable contributions and religious donations	14.	\$	25.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.		0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	78.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify: Self-Employment Tax	16.	\$	250.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	· -	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as			0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· -	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Scho			0.00
	20a. Mortgages on other property	20a.	·	0.00
	20b. Real estate taxes	20b.	·	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20e.		0.00
21.	Other: Specify: Miscellaneous	21.	+\$	100.00
22	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,465.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,403.00
			·	2.405.00
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,465.00
23.	Calculate your monthly net income.		L	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,709.50
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,465.00
	23c. Subtract your monthly expenses from your monthly income.			4 0 4 4 5 0
	The result is your monthly net income.	23c.	\$	4,244.50
24.	Do you expect an increase or decrease in your expenses within the year after your for example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?  No.			or decrease because of a
	☐ Yes. Explain here:			
	· · ·			

Fill in this inform	nation to identify your	case:				
Debtor 1	Linda R. Cannon (	Connor				
	First Name	Middle Name	Las	t Name		
Debtor 2	First Name	Middle Nesse	Las	4 Name		
(Spouse if, filing)	FIRST Name	Middle Name	Las	t Name		
United States Ban	kruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINO	IS		
Case number						
(if known)						☐ Check if this is an
						amended filing
Official Form	106Daa					
Official Form			<b>-</b>			
Declarati	on About a	n Individual	Debto	or's Schedule	es	12/15
If two married peo	ople are filing togethe	r, both are equally respo	onsible for s	supplying correct informa	ation.	
You must file this	form whenever you fi	le bankruptcy schedule	s or amend	ed schedules. Making a f	false state	ement, concealing property, or
obtaining money	or property by fraud in	n connection with a ban				00, or imprisonment for up to 20
years, or both. 18	U.S.C. §§ 152, 1341, 1	519, and 3571.				
Sign	Below					
Sign	Delow					
Did you pay	or agree to hav some	one who is NOT an atte	rnov to boln	you fill out bankruptcy f	forms?	
Did you pay	or agree to pay some	one who is NOT all allo	iney to neip	you fill out ballkruptcy i	011115 :	
■ No						
— Vaa N				Λ.	task David	luminatari Datitian Duan anawa Nation
☐ Yes. Na	ame of person					kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
					o o i a i a i i o i i ,	, and eignature (emetal reministre)
						_
	true and correct.	that I have read the sum	nmary and s	schedules filed with this o	declaration	on and
•						
	R. Cannon Connor		X	O'marting of Dalitan O		
	. Cannon Connor e of Debtor 1			Signature of Debtor 2		
Signature	O DEDIOI I					
Date Fe	ebruary 27, 2019			Date		
_	<u> </u>					

-HI	l in this inform	nation to identify you	r 0000						
	btor 1								
De	DIOI	Linda R. Cannon First Name	Middle Name	Last Name					
	btor 2								
(Sp	ouse if, filing)	First Name	Middle Name	Last Name					
Un	ited States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT C	OF ILLINOIS					
	se number nown)					heck if this is an mended filing			
	fficial Fo		Affairs for Individ	luals Filing for B	ankruptcy	4/16			
info nur	ormation. If m	ore space is needed n). Answer every que	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write yo				
1. 1.	•	r current marital statu	arital Status and Where You	Lived Before					
••	_	current maritar state							
	<ul><li>■ Married</li><li>■ Not mar</li></ul>	ried							
2.	During the la	last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. Lis	List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
<b>3.</b> stat					nity property state or territor ico, Texas, Washington and V				
	■ No □ Yes. Ma	ke sure you fill out <i>Sc</i> .	hedule H: Your Codebtors (O	fficial Form 106H).					
Pa	rt 2 Explai	n the Sources of You	r Income						
4.	Fill in the tota	al amount of income yo	nployment or from operating the received from all jobs and a have income that you receive	all businesses, including part		ndar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$3,200.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

	Debtor 1		Debtor 2		
	Sources of income Check all that apply.	<b>Gross income</b> (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$15,000.00	\$15,000.00		
	☐ Operating a business		☐ Operating a business		
For the calendar year before that: (January 1 to December 31, 2017)	■ Wages, commissions, \$0.00 bonuses, tips		☐ Wages, commissions, bonuses, tips		
	☐ Operating a business		☐ Operating a business		

#### 5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

	Debtor 1		Debtor 2			
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)		
From January 1 of current year until the date you filed for bankruptcy:	Daughter's Social Security - \$923.00 monthly	\$1,846.00				
	Pension - \$1711.50 monthly	\$3,423.00				
	Contribution from Son - \$1500.00 monthly	\$3,000.00				
	Contribution from \$1,300.00 Mother - \$650.00 monthly					
For last calendar year: (January 1 to December 31, 2018)	Social Security	\$20,538.00				
	Daughter's Social Security	\$11,076.00				
	Daughter's Food Stamps	\$2,304.00				
	Son's Contribution	\$18,000.00				
	Mother's Contribution	\$7,800.00				
For the calendar year before that: (January 1 to December 31, 2017)	Social Security	\$20,538.00				

Debtor 1	Line	da R. Canı	non Connor	Case number (if known)						
				Debtor 1				Debtor 2		
				Sources of in	ncome	Gross	income from	Sources of in	come	Gross income
				Describe belo		each s	ource deductions and	Describe below		(before deductions and exclusions)
				Daughter's S Security	3ocial		\$11,076.00	0		
				Daughter's F Stamps	Food		\$2,304.00	)		
				Son's Contri	bution		\$18,000.00	)		
				Mother's Co	ntribution		\$7,800.00	)		
3	111-4	O		Mada Batana	V Fil- I (	D1				
Part 3:				Made Before			су			
_		Neither De	btor 1 nor D	s debts prima ebtor 2 has propersonal, fami	rimarily consu	umer debt		ebts are defined in 1	11 U.S.C. § 10	01(8) as "incurred by ar
			•	•	bankruptcy, di	id you pay	any creditor a to	otal of \$6,425* or m	ore?	
		□ No.	Go to line 7							
		□ Yes	List below e	ach creditor to	whom you pai	id a total o	of \$6,425* or mo	re in one or more pa	ayments and	the total amount you
								bligations, such as	child support	and alimony. Also, do
		* Subject t		payments to ar t on 4/01/19 an				on or after the date	of adjustmer	nt.
	Vac	Debtor 1 o	r Debtor 2 o	r both have pi	rimarily const	ımar daht	te			
_	103.				-			otal of \$600 or more	e?	
		□ No.	Go to line 7							
		Yes						and the total amour		at creditor. Do not include payments to
				for this bankru		ibligations,	, such as chillu s	арроп апа ашпопу	. Also, do flot	include payments to
Cred	litor's	s Name and	I Address	Da	ates of payme	ent	Total amount	Amount you	Was this	payment for
							paid	still owe	was uns	payment for
One	Main	Financial	Group, LLC	M <sub>0</sub>	onthly - \$420	0.00	\$840.00	\$15,000.00	☐ Mortga	ge
									Car	
									☐ Credit (	Card
									☐ Loan R	epayment
									☐ Supplie	ers or vendors
									☐ Other_	_
								ı owed anyone wh		
								tnerships of which y		
includ	ding o									any managing agent, gations, such as child
		a aminoriy.								
_	No									
			nents to an in		_					
Insid	der's	Name and	Address	Da	ates of payme	ent	Total amount paid	Amount you still owe	Reason fo	or this payment

Deb	otor 1 Linda R. Cannon Connor	Case number (if known)						
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name		
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.							
	□ No							
	Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the case			
	US Bank v. Linda Connor 18-CH-20	Foreclosure  St. Clair County Circuit Clerk St. Clair County Courthouse 10 Public Square Belleville, IL 62220			<ul><li>■ Pending</li><li>□ On appeal</li><li>□ Concluded</li></ul>			
	■ No. Go to line 11. □ Yes. Fill in the information below.  Creditor Name and Address	Describe the Property  Explain what happene	d	Date		Value of the property		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed  No  Yes. Fill in the details.		cluding a bank or fir	nancial institutio	n, set off any	amounts from your		
	Creditor Name and Address	Describe the action the	e creditor took		Date action was Amount taken			
12.	<ul> <li>Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?</li> <li>No</li> <li>Yes</li> </ul>							
Par	t 5: List Certain Gifts and Contributions							
	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any giff	ts with a total value	of more than \$60	00 per person	?		
	Gifts with a total value of more than \$600 per person	Describe the gifts			s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							

Case number (if known)

14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity.  No							
	Yes. Fill in the details for each gift or contr							
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	I	Describe what you contributed		Dates you contributed	Value		
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy disaster, or gambling?	y or	since you filed for bankruptcy, did y	ou lose anytl	hing because of the	ft, fire, other		
	■ No							
	Yes. Fill in the details.							
	Describe the property you lost and how the loss occurred  Inc per	lude	be any insurance coverage for the log the amount that insurance has paid. Log insurance claims on line 33 of Schedity.	Date of your loss	Value of property lost			
Par	t7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prepince.  No Yes. Fill in the details.	oari	ng a bankruptcy petition?		, ,	rty to anyone you		
	Person Who Was Paid		Description and value of any prope	ertv	Date payment	Amount of		
	Address Email or website address Person Who Made the Payment, if Not You		transferred		or transfer was made	payment		
	DIXON & JOHNSTON, PC 101 West Main Street Belleville, IL 62220 JohnJohnston@dixonjohnston.com		Filing Fees - \$310.00		February 2019	\$310.00		
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No  Yes. Fill in the details.  Person Who Was Paid	rs o	r to make payments to your creditors	s?	r transfer any prope  Date payment	rty to anyone who		
	Address	transferred	or transfer was made	payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.							
	Person Who Received Transfer Address		Description and value of property transferred		ny property or received or debts	Date transfer was made		
	Person's relationship to you		paid i		change			

Debtor 1 Linda R. Cannon Connor

Debtor 1 Linda R. Cannon Connor

Case number (if known)

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)						
	No Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pr	operty trans	sferred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Insti	ruments. Safe Deposi	t Boxes, and S	Storage Uni	ts		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.						
	No	ations, and other initial	noidi motitutio				
	☐ Yes. Fill in the details.						
		Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	r bankruptcy, a	any safe de	posit box or other depos	sitory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within	1 year befo	re you filed for bankrupt	cy?	
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control fo	•					
			_				
23.	Do you hold or control any property that som for someone.	eone else owns? Incl	ude any prope	erty you bor	rowed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
Pai	t 10: Give Details About Environmental Infor	mation					
For	the purpose of Part 10, the following definition	ns apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surfac	e water, grour	• .			
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	as defined under any		I law, wheth	ner you now own, operat	e, or utilize it or used	
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, o		as a hazardou	ıs waste, ha	zardous substance, tox	ic substance,	

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 Linda R. Cannon Connor

Case number (if known)

24.	Has	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice			
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice			
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any env	ronmental	I law? Include settlements	and orders.			
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Witl	nin 4 years before you filed for bankrupt	cy, did you own a business or have ar	y of the fo	ollowing connections to any	y business?			
		A sole proprietor or self-employed in			-time or part-time				
		A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (LLP)					
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and fill	in the details below for each business	š.					
		siness Name dress	Describe the nature of the business		oloyer Identification number not include Social Security				
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		es business existed				
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement	to anyone	about your business? Incl	ude all financial			
		No							
	∐ Na:	Yes. Fill in the details below.	Date leaved						
		me dress mber, Street, City, State and ZIP Code)	Date Issued						

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Debtor 1 Linda R. Cannon Connor		Case number (if known)
Part 12: Sign Below		
I have read the answers on this Statement	ing a false statement, concealing	nments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection or up to 20 years, or both.
/s/ Linda R. Cannon Connor		
Linda R. Cannon Connor Signature of Debtor 1	Signature of Debto	r 2
Date February 27, 2019	Date	
Did you attach additional pages to Your Sta  ■ No □ Yes	ntement of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who i ■ No	s not an attorney to help you fill o	out bankruptcy forms?
☐ Yes. Name of Person Attach the B	ankruptcy Petition Preparer's Notice	e, Declaration, and Signature (Official Form 119).

Fill in this inform	Fill in this information to identify your case:				
Debtor 1 Linda R. Cannon Connor					
Debtor 2 (Spouse, if filing)					
United States E	Bankruptcy Court for the: Southern District of Illinois				
Case number (if known)					

Check	Check as directed in lines 17 and 21:					
	According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

 $\square$  Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

the same remai property, put the income from that property in one	COIUITIII	orny. II you	a nave nouning to i	eporti	or arry line, write ¢	of in the space.
				Colui Debt	mn A <b>or 1</b>	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).	and co	ommissi	ons (before	\$	1,733.00	\$
<ol> <li>Alimony and maintenance payments. Do not include Column B is filled in.</li> </ol>	payme	ents from	a spouse if	\$	0.00	\$
4. All amounts from any source which are regularly particle of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Do not include payments from a spour you listed on line 3.	<b>t.</b> Includ d, your	de regula depende	r contributions ents, parents,	\$	2,150.00	\$
5. Net income from operating a business, profession, or farm	Debtor	1				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from a business, profession, or fail	rm \$ _	0.00	Copy here ->	\$	0.00	\$
6. Net income from rental and other real property	Debtor	1				
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from rental or other real property	\$_	0.00	Copy here ->	\$	0.00	\$

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or non-filing s		
7.	Intere	est, dividends, and royalties			\$	0.00	\$		
8.	Unem	nployment compensation			\$	0.00	\$		
		ot enter the amount if you contend that the a r the Social Security Act. Instead, list it here		efit					
	For	r you	\$0.	00					
		r your spouse							
	benef	ion or retirement income. Do not include a fit under the Social Security Act.	·		\$	0.00	\$		
10.	Do no receiv dome	ne from all other sources not listed above of include any benefits received under the Soved as a victim of a war crime, a crime againstic terrorism. If necessary, list other source pelow.	ocial Security Act or paymenst humanity, or internation	nts al or					
		Daughter's Food Stamps			\$	192.00	\$		
					\$	0.00	\$		
		Total amounts from separate pages, if a	ny.	+	\$	0.00	\$		
11.		ulate your total average monthly income. column. Then add the total for Column A to		\$	4,075.00	+		=[\$_	4,075.00
Part	2:	Determine How to Measure Your Deduc	ctions from Income						tal average onthly income
12. 13.	Copy Calcu	your total average monthly income from ulate the marital adjustment. Check one:	line 11.					\$	4,075.00
		You are not married. Fill in 0 below.							
		You are married and your spouse is filing wi	th you. Fill in 0 below.						
	i (	You are married and your spouse is not filing Fill in the amount of the income listed in line dependents, such as payment of the spouse Below, specify the basis for excluding this in adjustments on a separate page.	11, Column B, that was NO e's tax liability or the spouse	's suppo	ort of someo	ne other th	nan you or your	depen	dents.
	I	If this adjustment does not apply, enter 0 be	low.						
				\$					
				\$					
				+\$_					
		Total		\$	0.0	00 co	py here=>		0.00
14.	You	r current monthly income. Subtract line 1	3 from line 12.					\$	4,075.00
15.		culate your current monthly income for th	ne year. Follow these steps	::					4.075.00
	15a.	Copy line 14 here=>						\$	4,075.00
		Multiply line 15a by 12 (the number of mo	nths in a year).					X	12
	15b.	The result is your current monthly income	for the year for this part of	the form				\$	48,900.00

Linda R. Cannon Connor

Debtor 1

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Case number (if known)

16	. Calcula	ate the median family income that applies t	o you. Follow these steps:		
	16a. Fil	I in the state in which you live.	IL		
	16b. Fil	I in the number of people in your household.	2		
	To	I in the median family income for your state are find a list of applicable median income amoustructions for this form. This list may also be a	ints, go online using the link specified in the separate	\$	69,871.00
17	. How do	the lines compare?			
	17a.		c. On the top of page 1 of this form, check box 1, <i>Disposable</i> o NOT fill out <i>Calculation of Your Disposable Income</i> (Official		
	17b.		op of page 1 of this form, check box 2, <i>Disposable income is</i> llculation of Your Disposable Income (Official Form 122) line 14 above.		
Par	t 3:	Calculate Your Commitment Period Under	11 U.S.C. § 1325(b)(4)		
18.	Сору у	our total average monthly income from line	e 11 .	\$	4,075.00
	Deduct	the marital adjustment if it applies. If you a	are married, your spouse is not filing with you, and you er 11 U.S.C. § 1325(b)(4) allows you to deduct part of your		
	19a. If t	he marital adjustment does not apply, fill in 0	on line 19a.	-\$	0.00
	19b. <b>S</b> u	ubtract line 19a from line 18.		\$	4,075.00
20.	Calcula	ate your current monthly income for the yea	ar. Follow these steps:		
	20a. Co	ppy line 19b		\$_	4,075.00
		ultiply by 12 (the number of months in a year).		×	12
	20b. Th	ne result is your current monthly income for the	e year for this part of the form	\$_	48,900.00
	20c. Co	ppy the median family income for your state an	nd size of household from line 16c	\$_	69,871.00
	21. <b>H</b> c	ow do the lines compare?			
	-	Line 20b is less than line 20c. Unless other period is 3 years. Go to Part 4.	rwise ordered by the court, on the top of page 1 of this form	, check box 3,	The commitment
		Line 20b is more than or equal to line 20c. commitment period is 5 years. Go to Part 4	Unless otherwise ordered by the court, on the top of page 1	of this form, o	heck box 4, The
Par	t 4:	Sign Below			
	By sign	ing here, under penalty of perjury I declare that	at the information on this statement and in any attachments	is true and cor	rect.
)	/s/ Lir	nda R. Cannon Connor			
		R. Cannon Connor ture of Debtor 1			
	Date F	February 27, 2019			
	If you c	hecked 17a, do NOT fill out or file Form 122C	-2.		
	If you c	hecked 17b, fill out Form 122C-2 and file it wit	th this form. On line 39 of that form, copy your current mont	thly income from	m line 14 above.

Linda R. Cannon Connor

Debtor 1

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Southern District of Illinois

	500	uthern District of Inmois			
In	re Linda R. Cannon Connor		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filit be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services ren	ndered or to
	For legal services, I have agreed to accept		<u> </u>	4,500.00	
	Prior to the filing of this statement I have received			0.00	
	Balance Due		\$	4,500.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mem	bers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national control of the same copy of the agreement.				w firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	s of the bankruptcy of	case, including:	
	<ul><li>a. Analysis of the debtor's financial situation, and rende</li><li>b. Preparation and filing of any petition, schedules, state</li><li>c. Representation of the debtor at the meeting of credited. [Other provisions as needed]</li></ul>	tement of affairs and plan which	may be required;	-	uptcy;
6.	By agreement with the debtor(s), the above-disclosed fe	ee does not include the following	service:		
		CERTIFICATION			
thi	I certify that the foregoing is a complete statement of an s bankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the de	btor(s) in
	February 27, 2019	/s/ John J. Johnsto	n		
	Date	John J. Johnston C			
		Signature of Attorne DIXON & JOHNST			
		101 West Main Str	eet		
		Belleville, IL 62220 618-233-1103 Fa:			
		JohnJohnston@dix			
		Name of law firm	•		

## **United States Bankruptcy Court** Southern District of Illinois

In re	Linda R. Cannon Connor		Case No.	
		Debtor(s)	Chapter	13
	<u>VERIFIC</u>	ATION OF CREDITOR MATR	<u>IX</u>	
	The above named Debtor(s) he correct to the best of my/our knowled schedules.	nereby verify that the attached lidge and that it corresponds to th		
Date:	February 27, 2019	/s/ Linda R. Cannon Connor Linda R. Cannon Connor		

Signature of Debtor

Americollect, Inc. 1851 South Alverno Road PO Box 1566 Manitowoc, WI 54221

Barclays Bank Delaware 100 South West Street Wilmington, DE 19801

Illinois Department of Revenue PO Box 19035 Springfield, IL 62794-9035

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

OneMain Financial Group, LLC PO Box 3251 Evansville, IN 47731-3251

Opportunity Financial, LLC 75 Remittance Drive Dept. 6231 Chicago, IL 60675-6231

Radiology Consultants of Mid-Americ Consumer Collection Management, Inc PO Box 1839
Maryland Heights, MO 63043

SFC of Illinois/Security Finance PO Box 1893 Spartanburg, SC 29304

SFC of Illinois/Security Finance 1512 West Boulevard Belleville, IL 62221

Shellpoint Mortgage Servi/US Bank PO Box 740039 Cincinnati, OH 45274-0039

Tek Collect, Inc. PO Box 1269 Columbus, OH 43216-1269

US Bank Anselmo Lindberg & Associates LLC 1771 West Diehl Road Suite 120 Naperville, IL 60563

World Finance Corporation PO Box 6429 Greenville, SC 29606

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